

Please indicate how well we did in the acquisition of your property by circling the appropriate category or checking the "not applicable" box.

WHITE RIVER JUNCTION

VT 050 2

Excellent

Good

Average

Average

Poor

Not Applicable

1. How well did we answer your questions about the proposed transportation project?

5

4

3

2

1

☐

2. How well did we explain the need for your property and the process used to purchase your property?

5

4

3

2

1

☐

3. Was the Right-of-Way Agent informed and responsive to your questions?

5

4

3

2

1

☐

4. Was the Right-of-Way Agent courteous and professional?

5

4

3

2

1

☐

5. How would you rate the usefulness of the printed material provided by the Department?

5

4

3

2

1

☐

Comments:

If you would like to be contacted by telephone to give additional information or comments, please complete this portion.

Name:

Phone Number: ()

DEPT. OF TRANSPORTATION

RIGHT-OF-WAY

To be completed by NHDOT Right-of-Way Agent

Project Number: *Alstead 14540M* Parcel Number:

OCT 23 2006

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